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APPLICATION NO.	FILING DATE	FIRST	T NAMED INVENTOR	ATTORNEY DOCKET NO	CONFIRMATION NO.	
09/637,674	08/14/2000		Michael John	11059	8215	
FITLE OF INVENTION: W	VOODEN POST PROTECTI	VE SLEEVE	Refund R 01/26/20	ef: 05 ZJUHAR2 0000141645	4×	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	ECK Refund Total	DATE DUE	
nonprovisional	YES	\$685	\$0	\$685	02/28/2005	
EXAMINER		ART UNIT	RT UNIT CLASS-SUBCLASS			
HORTON, YVONNE MICHELE		3635	052-170000	···		
PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME AND	tion (or "Fee Address" Indica or more recent) attached. Use D RESIDENCE DATA TO B	e of a Customer 2 lis E PRINTED ON THE 1	gistered attorney or agent) and the registered patent attorneys or agested, no name will be printed. PATENT (print or type) will appear on the patent. If an ubstitute for filing an assignment.	ents. If no name is 3	ne document has been filed f	
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